

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | zpt | | 02/01/01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | LT | 857 | 5/29/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

| | | | |
|---------------------------|------------|---------|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - (Through numeral) | Canceled | A | Appeal |
| | Restricted | O | Objected |

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| 14 | | | |
| 15 | | | |
| 16 | | | |
| 17 | | | |
| 18 | | | |
| 19 | | | |
| 20 | | | |
| 21 | | | |
| 22 | | | |
| 23 | | | |
| 24 | | | |
| 25 | | | |
| 26 | | | |
| 27 | | | |
| 28 | | | |
| 29 | | | |
| 30 | | | |
| 31 | | | |
| 32 | | | |
| 33 | | | |
| 34 | | | |
| 35 | | | |
| 36 | | | |
| 37 | | | |
| 38 | | | |
| 39 | | | |
| 40 | | | |
| 41 | | | |
| 42 | | | |
| 43 | | | |
| 44 | | | |
| 45 | | | |
| 46 | | | |
| 47 | | | |
| 48 | | | |
| 49 | | | |
| 50 | | | |

| Claim | | Date |
|-------|----------|------|
| Final | Original | |
| 51 | | |
| 52 | | |
| 53 | | |
| 54 | | |
| 55 | | |
| 56 | | |
| 57 | | |
| 58 | | |
| 59 | | |
| 60 | | |
| 61 | | |
| 62 | | |
| 63 | | |
| 64 | | |
| 65 | | |
| 66 | | |
| 67 | | |
| 68 | | |
| 69 | | |
| 70 | | |
| 71 | | |
| 72 | | |
| 73 | | |
| 74 | | |
| 75 | | |
| 76 | | |
| 77 | | |
| 78 | | |
| 79 | | |
| 80 | | |
| 81 | | |
| 82 | | |
| 83 | | |
| 84 | | |
| 85 | | |
| 86 | | |
| 87 | | |
| 88 | | |
| 89 | | |
| 90 | | |
| 91 | | |
| 92 | | |
| 93 | | |
| 94 | | |
| 95 | | |
| 96 | | |
| 97 | | |
| 98 | | |
| 99 | | |
| 100 | | |

| Claim | | Date | | | | | |
|-------|----------|------|--|--|--|--|--|
| Final | Original | | | | | | |
| | 101 | | | | | | |
| | 102 | | | | | | |
| | 103 | | | | | | |
| | 104 | | | | | | |
| | 105 | | | | | | |
| | 106 | | | | | | |
| | 107 | | | | | | |
| | 108 | | | | | | |
| | 109 | | | | | | |
| | 110 | | | | | | |
| | 111 | | | | | | |
| | 112 | | | | | | |
| | 113 | | | | | | |
| | 114 | | | | | | |
| | 115 | | | | | | |
| | 116 | | | | | | |
| | 117 | | | | | | |
| | 118 | | | | | | |
| | 119 | | | | | | |
| | 120 | | | | | | |
| | 121 | | | | | | |
| | 122 | | | | | | |
| | 123 | | | | | | |
| | 124 | | | | | | |
| | 125 | | | | | | |
| | 126 | | | | | | |
| | 127 | | | | | | |
| | 128 | | | | | | |
| | 129 | | | | | | |
| | 130 | | | | | | |
| | 131 | | | | | | |
| | 132 | | | | | | |
| | 133 | | | | | | |
| | 134 | | | | | | |
| | 135 | | | | | | |
| | 136 | | | | | | |
| | 137 | | | | | | |
| | 138 | | | | | | |
| | 139 | | | | | | |
| | 140 | | | | | | |
| | 141 | | | | | | |
| | 142 | | | | | | |
| | 143 | | | | | | |
| | 144 | | | | | | |
| | 145 | | | | | | |
| | 146 | | | | | | |
| | 147 | | | | | | |
| | 148 | | | | | | |
| | 149 | | | | | | |
| | 150 | | | | | | |

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

Best Available Copy